P02000/3/330

• (Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F		

Office Use Only



500121190905

03/31/08--01014--004 **35.00



RAChange News 4308

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Prisma Painting & Faux Finishes,	Inc.
(Name of Co	rporation)
DOCUMENT NUMBER: P02000131330	· · · · · · · · · · · · · · · · · · ·
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence concerning this matter t	to the following:
LILIAM RODRIGUEZ	
(Name of Cont	tact Person)
Prisma Painting & Faux Finishes	
(Firm/Con	mpany)
1913 SW 149TH AVE	
(Addre	ess)
MIRAMAR, FL 33027	
(City/State and	Zip Code)
For further information concerning this matter, please ca	dl:
LILIAM DODDIOUEZ	054 499 7974
LILIAM RODRIGUEZ (Name of Contact Person)	at (954) 433-7271 (Area Code & Daytime Telephone Number)
(1.11110-02-0011110-01)	(
Enclosed is a \$35.00 check made payable to the Departn	nent of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	IGHOROCCEE HI 4/4HI

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
-	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Prisma Painting / Faux Finishes, Inc.
2. The principal	office address: 1913 SW 149TH AVE, Miramar, FL 33027
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 12 13 02 Document number: P02000131330
	d street address of the current registered agent and registered office on file with the rtment of State:
	All Florida Firm, Inc
	813 Deltona Blvd. Ste A
	Deltona, FL 23725
6. The name and (if changed):	813 Deltona Blvd. Ste A Deltona, FL 23725 d street address of the new registered agent (if changed) and /or registered office
	LILIAM RODRIGUEZ
	1913 SW 149TH AVE
•	(P.O. Box NOT acceptable)
	Miramar, FL 33027
The street address changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.
Such change wanthorized by the	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
A J	Gustavo M. Rodriquez, PRESident (Printed or typed name and safe)
,	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance nd I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the is been notified in writing of this change.
	indiffer of Registered Agent) (Date)
1 20 ASI	ignificant of Registered Agent) (Date)
If signing on be	ehalf of an entity:
· · · · · · · · · · · · · · · · · · ·	Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of